



# IDAHO

DEPARTMENT OF FINANCE

## 2010 ASSESSMENT FEE NOTICE FOR IDAHO FINANCIAL INSTITUTIONS

INSTITUTION NAME \_\_\_\_\_

Person Completing Form \_\_\_\_\_

Telephone Number \_\_\_\_\_

**(1) OFFICE FEE:**

(a) Number of banking offices, including the head office. \_\_\_\_\_  
(*Do not include loan production, administrative or operations offices.*)

(b) Office fee of \$100 per office. \$ 100

(c) **TOTAL OFFICE FEE** (*Multiply line 1.a by 1.b.*) \$

**(2) ASSET FEE:**

(a) TOTAL ASSETS (*in thousands*) December 31, 2009 Call Report. \$

(b) Base Fee Due (*per attached fee schedule*). \$

(c) Amount due in excess of base fee (*per attached fee schedule*). \$

(d) **TOTAL ASSET FEE** (*Add lines 2.b and 2.c.*) \$

**(3) TOTAL ASSET AND OFFICE FEE** (*Add lines 1.c and 2.d.*) \$

**(4) FORTY PERCENT (40%) ASSESSMENT REDUCTION** (*Multiply line 3 by .40.*) \$

**(5) TOTAL ASSESSMENT FEE DUE FOR 2010** (*Subtract line 4 from line 3.*) \$

(*Round to nearest dollar*)

Please submit this completed form, including the name and telephone number of the person completing the form, along with your check payable to **STATE OF IDAHO, DEPARTMENT OF FINANCE**, to:

DEPARTMENT OF FINANCE P.O. BOX 83720 BOISE, IDAHO 83720-0031

*Please remit your payment within 30 days of receipt of this notice. Thank you.*